WWAMI Facts

- WWAMI is MT’s medical school and has been for 45 years.
- 957 MT residents have earned medical degrees or are current students in the WWAMI program.
- MT admits 30 new medical students through WWAMI each year; 10 of which are TRUST (Targeted Rural Underserved Tract) students.
- MT WWAMI graduate return rate is 42%; 58% overall program retention rate with all WWAMI-state graduates practicing in MT (national rate for in-state medical education is 38.5%).
- Approximately 415 MT physicians have clinical faculty appointments at UW.
- It takes a minimum of 7 years from entry to practice to become a physician (4 years in medical school, 3 years in residency).
- MT’s aging population and rural nature combine to produce a large medically underserved population.

Program Summary
In 1973, Montana entered into a cooperative program with the School of Medicine at the University of Washington and the states of Alaska and Idaho. Wyoming joined the program in 1996, resulting in “WWAMI”, the acronym for the cooperating states. WWAMI’s primary purpose is to make medical education accessible to students in northwestern states that do not have medical schools.

WWAMI Program Goals:
- Access to publicly supported medical education
- Avoid excessive capital costs by using existing educational infrastructure
- Create community-based medical education
- Increase the number of primary care providers (MD) /address maldistribution of physicians
- Support and encourage talented students, especially minority students, to enter the field of medicine
- Expand GME and CME across WWAMI

How Does the Program Work?
The program operates through a decentralized education process. In Montana, 30 new medical students enter the program each year and, as of fall 2016, complete the first 18 months of their medical education on the MSU campus. The second half of year two is spent preparing for and taking board exams. Clinical training (years 3 and 4) can then be completed across the WWAMI region. Both Billings and Missoula offer the full complement of third-year clinical training, and single-specialty clinical rotations for both the third and fourth years are available across Montana. This provision of clinical training in Montana engages our Montana physicians in helping educate the next generation and helps recruit WWAMI students to Montana communities.

State Support
In order to defray the cost of non-resident tuition to the UW Medical School, the state of Montana provides a subsidy for each student enrolled in the program. For FY 19 the state is providing $4.7M to support 90 students in years 2-4 of the WWAMI program at an average subsidy per student of $52,000 annually. State support covers the non-resident portion of tuition in addition to program operating and administrative costs. Students pay on average $36,801 annually in tuition to UW plus fees and living expenses.

WWAMI vs. New Medical School
The cost of establishing a medical school is sizable. The most recent publicly-funded medical school is Florida State. To begin their school with a class size of 30 students the state spent $155M. At full roll out with 120 students per class they expect to pay $38M annually to operate the school or $79,000 per student per year of state support.

Doctor Shortage
Montana TRUST (Targeted Rural Underserved Track) is a WWAMI initiative designed to alleviate the shortage of primary care and other needed specialties in rural and underserved areas of the state. This program seeks to select, educate, and support Montana students with an interest in rural or underserved medicine. Since 2008, 87 Montana WWAMI students have been selected for this program.